NOTICE OF FEE DUE

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DATE:	0/-1	0-02		1	•	
TO:	M1551	ng Pa	irts	.*		
FROM:	Office of Initial F	Patent Examinati	on		: :	
SUBJECT:	Fee Due			:	_	
APPLICAT	ION NUMBER:	09/94.	5,55 ₈	9	•	
Office for that authorization	e for the attached on the following reason to charge a depo appropriate fee. If diency.	n. Please check osit account. If a	the application in authorization	n for the apport is present, j	ropriate pleasé	
□ Insuffic	ient fee by check					
Insuffic	ient funds in depo	sit account			•	
☐ Decline	d credit card				-	
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The correct	t fee code:	3=18	amount	\$/_	8	•
The suspended fee code: 197		7	amount	- \$		-
Fee Due			amount	=\$	8	_
If you have Eleanor Ku	any questions, plortz at 703-308-364	ease contact Cyn 12.	thia Streater at	703-306-54	30 or	

Terminal Operator _